



Lakes & Prairies Child Care Aware®



TRAINING REQUEST FORM

Thank you for your interest in scheduling Tailored Training for Groups (TTG) with us. Please fill out your contact information and areas of interest for training below. You might not have all the details right now, and that's okay. Provide as much information as you can at this time.

Organization: _____

Organization Contact: _____

Address: _____ City/State/Zip: _____

Phone: _____ Email: _____

Training elements desired:

Topic(s) / KCF area(s): _____

Trainer: _____

Date(s) and time(s) available: _____

Location: _____ Approximate head count: _____

Pricing:

<u>Group Size</u>	<u>Training Fee</u>
1-10 participants	\$100/hour
11-25 participants	\$125/hour
26-50 participants	\$150/hour

SUID/AHT is free regardless of group size. If the trainer travels over 100 miles one-way, the cost of mileage and hotel room will be added to the final invoice.

The invoice will reflect the total training fee according to the price matrix above, plus any related trainer travel costs. An invoice will be sent after the event. Payment is due within 30 days upon receipt of the invoice.

Please return completed form to MNTRAINING@CAPLP.ORG for best response. TTG requests will be processed on a first-come, first-served basis.